Docket No.: PF-0040 US

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on \_\_\_\_\_\_\_\_\_.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

A A	pplication of:	Coleman et al.	)	Group Art U	Jnit: 1812
Serial 1	No.:	08/462,355	)	Examiner:	J. Ulm
Filed:		June 5, 1995	)		
Title:	A C5a-LIKE S RECEPTOR	SEVEN TRANSMEMBRANI	E ) (		

Assistant Commissioner for Patents Washington, D.C. 20231

## AMENDMENT TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

- 1. Amendment (8 pp.);
- 2. Substitute Submission Under 37 CFR §§1.821-1.825 (1 pg.);
- 3. Diskette containing substitute copy of Substitute Sequence Listing;
- 4. Paper copy of Substitute Sequence Listing (5 pp.);
- 5. Petition for Extension of Time (1 pg, in duplicate.); and
- 6. Return Receipt Postcard

The fee has been calculated as shown below.

Claims	Claims After Amendment		Claims Previously Paid For	=	Present Extra	Small Rate	Entity Fee	Other Small Rate		Additional Fee(s)	
Total Claims	6	-	20	=	0	\$11		\$22		\$0	
Indep. Claims	2	-	3	=	0	\$40		\$80		\$0	
_ First Present	tation of Multiple De	penden	ıt Claim			+\$	130	+\$:	260	\$0	

**TOTAL** 

**\$\_0** 

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	No additional fee is required.	
<u>X</u>	Fee for Request for Extension of Time (2 months)	\$ <u>390.00</u>
<u>X</u>	Please charge Deposit Account No. 09-0108 the amount of	\$390.00

The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

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Respectfully submitted,

INCYTE PHARMACEUTICALS, INC.

Lucy 1. Billings Reg. No. 36,749

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Palo Alto, California 94304

Phone: (415) 855-0555 Fax: (415) 845-4166

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